
By: **Delegates Nathan-Pulliam, Barkley, Burns, C. Davis, Harrison, Jones, McDonough, Murray, Paige, and V. Turner V. Turner, Hurson, Hammen, Benson, Boutin, Bromwell, Costa, Donoghue, Elliott, Goldwater, Haynes, Hubbard, Kach, Mandel, Morhaim, Oaks, Pendergrass, Redmer, Rosenberg, Rudolph, Smigiel, and Weldon**

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CHAPTER _____

1 AN ACT concerning

2 **Task Force on the Needs of Persons with Co-Occurring Mental Health and**
3 **Substance Abuse Disorders**

4 FOR the purpose of establishing a Task Force on the Needs of Persons with
5 Co-Occurring Mental Health and Substance Abuse Disorders; providing for the
6 composition of the Task Force; requiring the Task Force to elect a chairman and
7 vice-chairman of the Task Force from among the Task Force's members;
8 requiring the Mental Hygiene Administration and the Alcohol and Drug Abuse
9 Administration to provide staffing for the Task Force; prohibiting members from
10 receiving compensation but entitling members to reimbursement of expenses
11 under a certain law; requiring the Task Force to study and make
12 recommendations regarding certain ways of delivering certain services, securing
13 funding, and providing certain training to a certain population; requiring the
14 Task Force to submit certain reports to the Governor and certain committees on
15 or before certain dates; requiring the Mental Hygiene Administration to conduct
16 a certain study and submit a certain report to certain committees on or before a
17 certain date; providing for the termination of this Act; and generally relating to
18 a Task Force on the Needs of Persons with Co-Occurring Mental Health and
19 Substance Abuse Disorders.

20 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
21 MARYLAND, That:

1 (a) There is a Task Force on the Needs of Persons with Co-Occurring Mental
2 Health and Substance Abuse Disorders.

3 (b) The Task Force consists of the following members appointed by the
4 Governor:

5 (1) one representative of the Mental Health Administration;

6 (2) one representative of the Alcohol and Drug Abuse Administration;

7 (3) one representative of the Department of Human Resources;

8 (4) one social worker from the Department of Social Services;

9 (5) one representative of the Department of Rehabilitative Services;

10 (6) one representative of the AIDS Administration;

11 (7) one representative of the Department of Juvenile Justice;

12 (8) one representative of the Faith-Based Community Providers;

13 (9) one representative of the Department of Housing and Community
14 Development;

15 (10) one representative of the Department of Public Safety and
16 Correctional Services;

17 (11) one State court judge;

18 (12) one representative of the State's Attorney's Office;

19 (13) one representative from the Public Defender's Office;

20 (14) one representative who is a consumer of co-occurring disorder
21 services or who has a family member who uses such services;

22 (15) one representative of the Co-Occurring Disorders Workgroup of the
23 National Council on Alcoholism and Drug Dependence, Inc. - Maryland and Mental
24 Health Association of Maryland;

25 (16) one representative from the Maryland Psychiatric Society;

26 (17) one representative from the Maryland Nurses Association; ~~and~~

27 (18) one representative from the Maryland Hospital Association;

28 (19) one representative from the Community Behavioral Health
29 Association of Maryland;

1 (20) one representative from the Maryland Legislative Council of Social
2 Workers; and

3 ~~(18)~~ (21) two consumers.

4 (c) The members of the Task Force shall elect the chairman and
5 vice-chairman from among the Task Force's members.

6 (d) The Mental Hygiene Administration and the Alcohol and Drug Abuse
7 Administration shall provide staff for the Task Force.

8 (e) A member of the Task Force:

9 (1) may not receive compensation; but

10 (2) is entitled to reimbursement for expenses under the Standard State
11 Travel Regulations, as provided in the State budget.

12 (f) The Task Force shall:

13 (1) identify and recommend creative ways to provide and deliver
14 comprehensive, integrated, cost-effective services to the population with co-occurring
15 mental health and substance abuse disorders;

16 (2) identify and recommend various methods of funding services through
17 private and public sources;

18 (3) make recommendations regarding both short-term and long-term
19 residential services for people with co-occurring disorders, including
20 recommendations on the number of units needed and a timeline for providing
21 residential services;

22 (4) make recommendations regarding how the Mental Hygiene
23 Administration and Alcohol and Drug Abuse Administration may implement
24 cross-training for mental health and addiction counselors; and

25 (5) make recommendations regarding necessary legislation to implement
26 the Task Force's recommendations.

27 (g) (1) The Task Force shall issue an interim report of its findings and
28 recommendations to the Governor and, subject to § 2-1246 of the State Government
29 Article, the Senate Education, Health, and Environmental Affairs Committee and the
30 House Health and Government Operations Committee on or before December 1, 2004.

31 (2) The Task Force shall issue a final report on its findings and
32 recommendations to the Governor and, subject to § 2-1246 of the State Government
33 Article, the Senate Education, Health, and Environmental Affairs Committee and the
34 House Health and Government Operations Committee on or before December 1, 2005.

35 SECTION 2. AND BE IT FURTHER ENACTED, That:

1 (a) The Mental Hygiene Administration shall conduct or commission a study
2 on the relationship between substance abuse and mental illness among counties in
3 Maryland.

4 (b) When appropriate, the study shall utilize existing resources and data
5 available from such entities as the Maryland Health Care Commission and the Task
6 Force to Study Increasing the Availability of Substance Abuse Treatment.

7 (c) The Mental Hygiene Administration shall report to the Governor, the
8 Maryland Legislative Black Caucus, the Senate Education, Health, and
9 Environmental Affairs Committee, and the House Health and Government
10 Operations Committee on or before January 1, 2004, in accordance with § 2-1246 of
11 the State Government Article, on the findings and recommendations of the study.

12 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
13 October 1, 2003. It shall remain effective for a period of 2 years and 3 months and, at
14 the end of December 31, 2005, with no further action required by the General
15 Assembly, this Act shall be abrogated and of no further force and effect.